

MORRISON | FOERSTER

425 MARKET STREET
 SAN FRANCISCO
 CALIFORNIA 94105-2482
 TELEPHONE: 415.268.7000
 FACSIMILE: 415.268.7522
 WWW.MOFO.COM

MORRISON & FOERSTER LLP
 NEW YORK, SAN FRANCISCO,
 LOS ANGELES, PALO ALTO,
 SAN DIEGO, WASHINGTON, D.C.
 DENVER, NORTHERN VIRGINIA,
 ORANGE COUNTY, SACRAMENTO,
 WALNUT CREEK, CENTURY CITY
 TOKYO, LONDON, BEIJING,
 SHANGHAI, HONG KONG,
 SINGAPORE, BRUSSELS

TO:	FACSIMILE:	RECEIVED
Central Fax US Patent and Trademark Office	(571) 273-8300	CENTRAL FAX CENTER
		FEB 08 2007

FROM: MICHAEL R. WARD
 Reg. No. 38,651

DATE: February 8, 2007

Number of pages with cover page:	14	Preparer of this slip has confirmed that facsimile number given is correct: MRW1/8693/lxo3

Comments:

Attorney Docket No: 416272003900

DOCUMENTS ATTACHED: RESPONSE TO OFFICE ACTION

- 1) Transmittal - 1 pg
- 2) Fee Transmittal - 2 pgs
- 3) Extension (3 months) - 1 pg
- 4) Response to OA of 8/8/06 - 9 pgs

SMALL ENTITY ☒

LARGE ENTITY ☐

To ensure compliance with requirements imposed by the United States Internal Revenue Service, Morrison & Foerster LLP informs you that, if any advice concerning one or more U.S. Federal tax issues is contained in this facsimile (including any attachments), such advice is not intended or written to be used, and cannot be used, for the purpose of (i) avoiding penalties under the Internal Revenue Code or (ii) promoting, marketing or recommending to another party any transaction or matter addressed herein.

CAUTION - CONFIDENTIAL

This facsimile contains confidential information that may also be privileged. Unless you are the addressee (or authorized to receive for the addressee); you may not copy, use, or distribute it. If you have received it in error, please advise Morrison & Foerster LLP immediately by telephone or facsimile and return it promptly by mail.

sf-2267006

FEB 08 2007


PTO/SB/21 (08-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

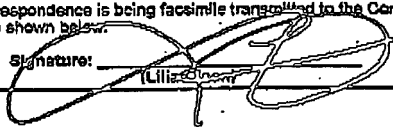
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/519.121	
	Filing Date	September 15, 2003	
	First Named Inventor	Marc K. HELLERSTEIN	
	Art Unit	1655	
	Examiner Name	B. Shen	
Total Number of Pages in This Submission	13	Attorney Docket Number	416272003900

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form IN DUPL- 2 pgs <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply RESP to OA of 8/8/06 - 0 pgs <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request - 1 pg <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement (Supplemental, 3 pages) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.62 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): FAX COVER SHEET - 1 pg
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	MORRISON & FOERSTER LLP (Customer No. 20872)	
Signature		
Printed name	Michael R. Ward	
Date	February 8, 2007	Reg. No. 38,651

FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the Commission for Patents, at facsimile no. (571) 273-8300, on the date shown below.

Dated: February 8, 2007 Signature: 


af-1927548

FEB 08 2007

PTO/SB/H7 (12-04)

Approved for use through 07/31/2008, OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2005</h3>		Complete if Known Application Number <u>10/519,121</u> Filing Date <u>September 15, 2003</u> First Named Inventor <u>Marc K. HELLERSTEIN</u> Examiner Name <u>R. Shen</u> Art Unit <u>1655</u> Attorney Docket No. <u>416272003900</u>	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT (\$) <u>510.00</u>			
METHOD OF PAYMENT (check all that apply)			
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____			
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison & Foerster LLP</u> For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)			
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
FEE CALCULATION			
1. BASIC FILING, SEARCH, AND EXAMINATION FEES			
FILING FEES		SEARCH FEES	
EXAMINATION FEES			
Application Type	FEE (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	0
Design	200	100	0
Plant	200	100	0
Reissue	300	150	0
Provisional	200	100	0
2. EXCESS CLAIM FEES			
Fee Description		Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent		50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent		200	100
Multiple dependent claims		350	180
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
12-20 or HP	x	=	0
HP ÷ highest number of total claims paid for, if greater than 20			
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
1-3 or HP	x	=	0
HP ÷ highest number of independent claims paid for, if greater than 3			
3. APPLICATION SIZE FEE			
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=
4. OTHER FEE(S)			
Other: <u>2263 EXTENSION OF TIME (3 months)</u>		\$510.00	
SUBMITTED BY: MORRISON & FOERSTER LLP		CUSTOMER NO. 20872	
Signature			Telephone <u>415/268-6237</u>
Name (Print/Type)	<u>MICHAEL R. WARD</u>		Date <u>February 8, 2007</u>

sf-2266991